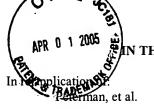
Attorney/Docket No. 31132.30 Customer No. 000027683



Serial No.: 11/031,904

Filed: January 7, 2005

## N THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Group Art Unit: 3738

§ § §

Confirmation No.: 8159

Examiner: Unknown

For: INTERCONNECTED SPINAL DEVICE

AND METHOD

INFORMATION DISCLOSURE STATEMENT

Mail Stop Amendment Commissioner For Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In compliance with the duty of disclosure under 37 CFR §1.56, and in accordance with the practice under 37 CFR §1.97 and §1.98, the Examiner's attention is directed to the documents listed on the enclosed modified Form PTO-1449. No inference should be made that the cited references are in fact material, are in fact prior art, or that no better art exists. The cited patents are listed in numerical order and are not in any order based on their pertinence.

The above-identified application was filed after June 30, 2003. Therefore, pursuant to the waiver of the requirement under 37 CFR 1.98 (a)(2)(i) as stated in a Pre-OG Notice dated July 11, 2003, copies of only the foreign patent documents and non-patent literature listed on the enclosed modified Form PTO-1449 are attached.

This Information Disclosure Statement is being filed within three months of the United States filing date or before the mailing date of a first Office Action on the merits. No certification or fee is required (37 CFR §1.97(b)).

The Commissioner is hereby authorized to charge any additional fees which may be required or credit any overpayment to Deposit Account 08-1394.

It is respectfully requested that the above information be considered by the Examiner and that a copy of the enclosed Form PTO-1449 be returned indicating that such information has been considered.

Respectfully submitted,

Julie M. Nickols

Registration No. 50,826

HAYNES AND BOONE 901 Main Street, Suite 3100 Dallas, Texas 75202-3789

Telephone: 972-739-8640 Facsimile: 214-200-0853

Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on \_\_\_\_\_\_

Gayle Conner Printed Name

Signature

In place of PTO-1449			F COMMERCE MARK OFFICE	Complete if Known		
Form	APR 0.1 200	(پير ک	,	Application Number	11/031,904	
INFO	ATION D	IS LC	SURE	Filing Date	January 7, 2005	
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l				Examiner Name	Unknown	
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Examiner's	Cite	Include name of the author (in CAPITAL LETTERS), title of the article, title of the item, date, page(s), volume-					
Initials	No.	issue number(s), publisher, city/country where published					
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include a copy of this form with next communication to applicant.

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In place of PTO-1449 Form	U. S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE		Complete if Known
	图 AFK U 1 2005	Application Number	11/031,904
INFO	AMATION DISCLOSURE	Filing Date	January 7, 2005
	EMENTER APPLICANT	Applicant(s)	Peterman, et al.
	e as many sheets as necessary)	Art Unit	3738
		Examiner Name	Unknown

Attorney Docket Number

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Examiner's Initials	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article, title of the item, date, page(s), volume- issue number(s), publisher, city/country where published					

Examiner	Date
Signature	Considered

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R-102712\_1.DOC Customer No. 000027683

In place of PTO-1449 Form			F COMMERCE IARK OFFICE	Complete if Known			
				Application Number 11/031,904			
INFO	RMATION D	ISCLO	SURE	Filing Date	January 7, 2005		
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				Examiner Name	Unknown		
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